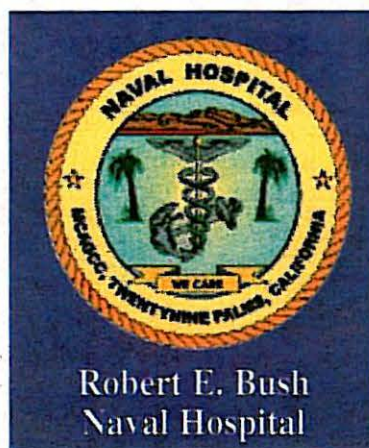




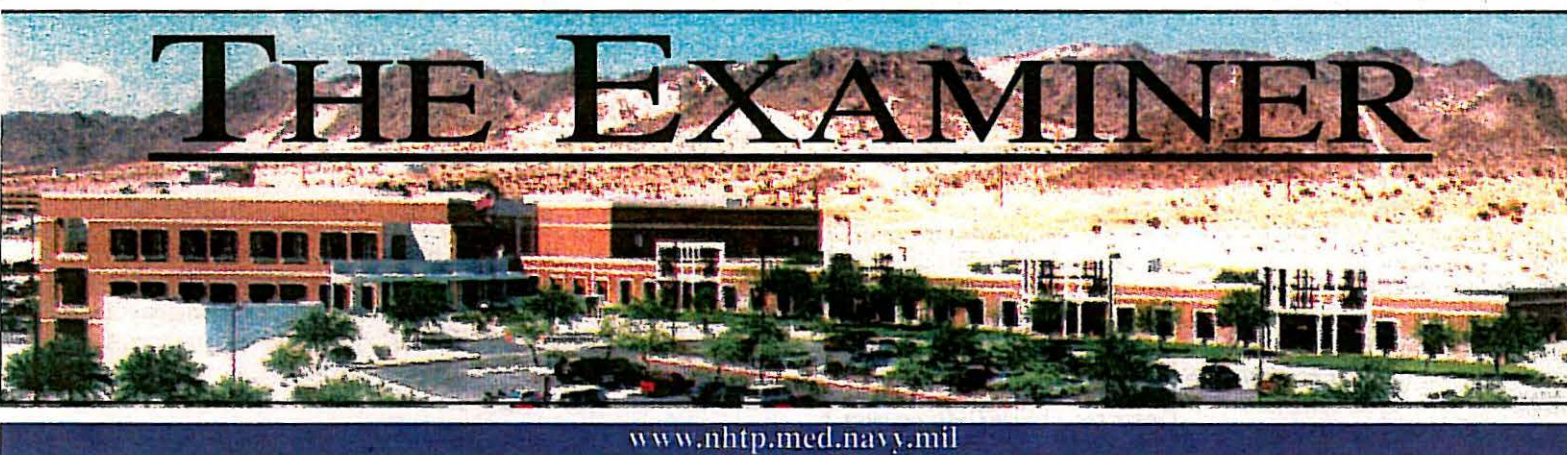
See our Superstars on  
pages 4 & 5.



Robert E. Bush  
Naval Hospital

## Happy Birthday Dental Techs

Est. April 2, 1948



[www.nhttp.med.navy.mil](http://www.nhttp.med.navy.mil)

## Navy Medicine's Symbols

Navy Medicine now has a new logo, which has been approved by Admiral Donald Arthur, Surgeon General of the Navy, for use throughout all Navy Medicine commands.

This logo consists of several key elements:

- \* The Red Cross: internationally recognized as a symbol of medical care.

- \* The Blue/Green Globe: depicts the wide reaching impact of our mission and care. Navy Medicine goes virtually anywhere. Blue and green colors have dual impact, representing both land and sea, as well as a symbol of Navy and Marine Corps teamwork.

- \* Nautical ties: the anchor and line honor our rich history as a sea service.

- \* Snake: when added to the anchor, this element acts as a contemporary Navy Medicine version of the traditional caduceus.

- \* Navy Medicine name/tagline: boldly tells audiences who we are and lets them know we provide world class care...anytime, anywhere.

The ceremonies, customs and traditions of our modern Navy, draw their origin from ancient customs and laws of the sea, which began in historic times by seafaring men and gradually merged into the British Navy Regulations in effect at the time of the American Revolution. The effects these old customs have had in the formulation of naval regulations are a marked example of the influence of tested usage.

John Adams, who compiled the first rules for regulation of the Navy in the United Colonies, and thus set a precedent for future provisions, used the instructions and regulations of the British Admiralty as his guide. It was under the direction of these that the Father of the U.S. Navy, John Paul Jones, a British born subject, gave our Navy its earliest traditions of



**NAVY MEDICINE**  
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heroism and victory.

Those traditions live on in another Navy symbol that is indicative of the service the men and women of the Robert E. Bush Naval Hospital

Please see **SYMBOLS** on page 7

## Protect Yourself from Becoming a Heat Casualty

By Dan Barber, Public Affairs Officer  
Naval Hospital Twentynine Palms

Marines and Sailors here at the Marine Corps Air Ground Combat Center are constantly training or preparing to train for the ultimate job of being ready to protect the freedoms of the United States and its allies against many different enemies.

Part of that readiness is to be prepared in Force Protection. This means to keep the Marines and Sailors safe from terrorist attack and where the Naval Hospital is concerned health problems.

One of the hazards lurking here in the desert that could cause a great deal of harm is hot dry weather.

We are fast approaching the summer season here and its time to renew efforts for people to avoid overdoing exercise or play in the Mojave. It's time to renew the awareness of the rules during Physical Training and Testing (PT).

Safety concerns with heat and PT are very real, especially in a desert environment. Dehydration is a constant threat when exercising in the heat. Since thirst occurs too late to be a good indicator of excessive

Please see **HEAT CASUALTY** on page 7

## Inside...

In 2003, April was declared Las National Donate Life Month to increase awareness of the critical need for organ, tissue, marrow, and blood donation. More than 87,000 people are currently waiting for the gift of life. **page 2**

A commonly asked question in Primary Care is "What is a healthy weight for me?" **page 6**

Effective communication in our healthcare setting is both necessary and challenging. **page 6**

On any given day at Naval Hospital Twentynine Palms (NHTP), you will see staff in a variety of uniforms appropriate for their specific job: **page 8**

Visit the Naval Hospital at  
[www.nhttp.med.navy.mil](http://www.nhttp.med.navy.mil)

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Here's to Your Health...

# April is Cancer Prevention Month!

By Martha Hunt, MA, Health Promotion Coordinator  
Robert E. Bush Naval Hospital

**T**he American Cancer Society estimates that over 550,000 Americans will die this year from cancer. This means that over 1,500 Americans will die every day in this country from cancer, making cancer the second leading cause of death in the US with only heart disease causing more deaths. The most deadly of all cancers, for both men and women, is lung cancer which has risen astronomically since World War II when tobacco use began to skyrocket in the turning military troops after the war.

The leading cancers among men include lung, prostate, colorectal and pancreatic cancers. However, for young men ages 18 to 35, testicular cancer is the leading cause of cancer related death. Not until past age 35 does lung and prostate cancer pass testicular cancer as the leading cause of cancer related death in men. The leading cancers for women include lung, breast, colorectal and ovarian cancers.

Many of these forms of cancers have screening tests that will help catch cancers early, when they are more easily treated and less likely to cause death or disability. However, even though lung cancer is the most deadly form of cancer for both men and women, there is no reliable screening test for lung cancer. The best way to avoid lung cancer is to not use tobacco and to avoid all second hand smoke.

For colorectal cancer, the most common screening tests available are tests for blood in the stool, called fecal occult blood screening, and a review of your family history. If you have at least one person in your immediate family that is related by blood and who has had colorectal cancer, you should be routinely tested at an early age for colorectal cancer by examination of your colon and rectum by the insertion of a long, thin camera tube into your colon called a sigmoidoscopy. By viewing your colon with a camera, your doctor can see any polyps or other abnormal growths in the lining of your colon. Colorectal cancer screening should begin at age of fifty.

The cancer screening tests that are available and apply specifically to men include a blood test called the Prostate Specific Antigen test (or PSA test) that screens for prostate cancer and manual examination of the testicles to screen for testicular cancer. The PSA screening test looks for a chemical produced by a man's prostate that becomes elevated when there are changes in normal prostate tissue. These changes can be either cancerous or non-cancerous, but the PSA test can be used by a doctor as a signal to check for further signs of prostate cancer. All African American men over age 40 and all other men over the age of 50 should have this blood test every year. African American men have much higher rates of prostate cancer and therefore need to seek screening at a younger age. Also, some nutritional supplements, such as Saw Palmetto, can make the PSA test give inaccurate results and may

cause cancer to be missed.

Regarding testicular cancer, all men should examine their testicles every month for any changes such as shape, swelling or pain. If anything out of the ordinary is felt, they should seek medical care from their doctor.

The most common cancer screening tests for women are Pap tests, which screen for cervical cancer, and mammograms and breast self exam (BSE) which screen for breast cancer. Pap tests screen for cervical cancer by looking for the growth of abnormal cells on the cervix which is the opening to the uterus. All women who are either sexually active or who are over the age of 18 should have a Pap test performed every year by their doctor.

Mammograms are x-rays of the breasts and are used to detect cancer in breast tissues. All women over the age of 40 should have a mammogram performed every year. Breast self exams or BSE's involve the woman or her doctor examining her breasts on a monthly basis for any changes, lumps, swelling, pain or abnormal discharges. All women over the age of 20 should examine their breasts once a month approximately one week after the first date of their menstrual period and they also should have their doctor examine their breasts when they have their yearly physical.

While screening tests like these can help catch cancer at earlier and more treatable stages, prevention of cancer in the first place is key to living a cancer free life. The single most important way to prevent cancer in your life is to not use tobacco. Remember, lung cancer is the leading cancer killer in both men and women and tobacco also contributes to other forms of cancer such as bladder, oral cancers, etc. Other ways to help prevent cancer is by eating a diet low in fat and high in fiber, avoiding excessive exposure to sun, avoiding excessive use of alcohol (especially if you use tobacco) and by avoiding exposure to toxic chemicals and radiation that are known to cause cancer. By following these guidelines and by taking advantage of the screening tests available to detect cancer, you have a better chance of living a cancer free life and living a longer, healthier life.

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#### Commanding Officer

Captain Robert J. Engelhart, MSC, USN

#### Executive Officer

Captain Alan R. Rowley, MC, USN

#### Public Affairs Officer/Editor

Dan Barber

The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

#### How to reach us...

Commanding Officer Naval Hospital  
Public Affairs Office  
Box 788250 MAGTFTC  
Twentynine Palms, CA 92278-8250  
Com: (760) 830-2362  
DSN: 230-2362  
FAX: (760) 830-2385  
E-mail: d.barber@nhtp.med.navy.mil  
Hi-Desert Publishing Company  
56445 Twentynine Palms Highway  
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# Robert E. Bush Naval Hospital Announcements

## Sibling Preparation for a New Baby

Robert E. Bush Naval Hospital will be offering a Sibling Preparation Class on Saturday, Apr. 3, from 10 a.m. to noon.

This class is designed to help children of expectant families prepare for the role of big brother or big sister. Geared toward children ages 3-years and up, pre-registration is requested and can be done by calling Outpatient Services at 830-2752. The class is located in classrooms 1&2 in the Naval Hospital. For more information, please call Lt. Cmdr. Marjorie Alexander at 830-2771 or Lt. Cmdr. Nicole Polinsky at 830-2258.

## Once Again, Let's have some fun on the Ridge!

The Robert E. Bush Naval Hospital's MWR Committee is once again hosting the 18th Annual Ridge Run, Friday, April 2 with a start time of 7 a.m.

The hospital is looking for individual and squad (5 or more) participation.

Volunteers also needed to help with set-up/race day procedures.

Look for entry forms at the Naval Hospital and MCCR facilities.

## What's New with Medicare Part B?

*Are you, someone you know eligible to enroll in Medicare Part B, but you haven't due to the premium surcharge you would have to pay?*

*DoD has good news for you!*

One of the provisions of the Medicare Prescription Drug, Improvement and Modernization Act of 2003 allows uniformed services beneficiaries who would be eligible for TRICARE For Life (TFL) but are not enrolled in Medicare Part B to enroll without penalty during a special enrollment period (SEP) through Dec. 31, 2004. (TRICARE Management Activity will announce when the special enrollment period will begin.) Beneficiaries also have the option of enrolling in Part B during the general enrollment period (GEP) and receiving a rebate of any premium surcharges paid in 2004. To follow are the pros and cons of enrollment during the SEP versus GEP:

\* Eligible beneficiaries may enroll in Part B now, during the GEP, and pay a premium surcharge that will be later rebated. Their enrollment will be effective July 1, 2004, but the rebate of premium surcharges will not begin until Medicare performs a sweep of its database later in the year.

\* Or, eligible beneficiaries may wait until the SEP (to be announced) and enroll in Part B with no premium surcharge. Waiting to enroll during the SEP means beneficiaries will not have to wait for a rebate. Their effective date for health care services, however, may not begin on July 1.

### Who's eligible?

- \* Medicare-eligible retirees, including retired National Guard and reservists
- \* Eligible qualifying family members and survivors
- \* Certain former spouses if they were eligible for TRICARE before age 65, and who have not remarried and do not have employer-sponsored other health insurance
- \* Dual-eligible beneficiaries under the age of 65 who are entitled to Medicare Part A because of a disability or because of end-stage renal disease

#### Notification

\* TRICARE Management Activity is working with the Centers for Medicare and Medicaid Services (CMS) and Social Security Administration to send uniformed services beneficiaries targeted information on Medicare Part B enrollment and where they need to go to process their Part B enrollment form (which they will receive in a CMS mailing scheduled for the summer).

The Medicare Prescription Drug, Improvement and Modernization Act of 2003 also includes a provision for beneficiaries who enrolled in Medicare Part B between January 2001 and December 2004 and are subject to a penalty for late enrollment. Beginning January 2004, these beneficiaries will have the penalty waived. TRICARE Management Activity is working with the Centers for Medicare and Medicaid Services (CMS) to determine the action eligible beneficiaries need to take to make use of this opportunity. Once CMS has determined exactly what eligible beneficiaries need to do, TRICARE Management Activity will update this site with that information. For the latest updates,

*Please see MEDICARE PART B on page 7*

## Chief Petty Officer's Association Golf Scramble

To commemorate the 111th birthday of the Chief Petty Officer, the Chief Petty Officer's Association Golf Scramble will take place Friday Apr. 2, with a show time of 7 a.m. A putting contest will take place at 7:30 a.m. with a shotgun start at 8 a.m.

The Scramble will consist of four person teams. Cost is \$35 per person which includes lunch, green fees, cart and range balls.

Prizes will be awarded for 1st, 2nd and 3rd place teams, putting contest, long drive and closest to the pin.

Sign up at Desert Winds in person or call 830-6132. For more information call CMDM Mitchell at 830-2424.

## Cancer Awareness Month

Health Promotions of Naval Hospital Twentynine Palms will be at the main exchange Wednesday, Apr. 14, from 11 a.m. to 4 p.m., to hand out health information regarding Cancer Awareness Month. Health Promotions will also be at the exchange on Friday Apr. 30, for National Blood Pressure Awareness Month. For more information contact Health Promotions at 830-2814.

## March Smoking Cessation

Start the New Year off right! Kick the habit and learn to become tobacco free!

The Robert E. Bush Naval Hospital Health Promotions Program offers tobacco cessation classes in the Naval Hospital. Classes are offered at two convenient times of noon and 5:30 p.m.. To sign up, call Health Promotions at 830-2814. The next set of tobacco cessation classes will start on Apr. 20. Call now before it all goes up in smoke!

## Diabetes Self-Management Class

There will be a Diabetes Self-Management Class at the Robert E. Bush Naval Hospital in Classrooms 1 and 2 on Apr. 20, from 8 a.m. to noon.

Eligible beneficiaries newly diagnosed with diabetes or if you need updated or ongoing diabetes information/education should plan to attend.

Topics covered will include Diabetes basics, nutrition, potential complications, emotional aspects, and exercise.

For more information or to sign up, please call the hospital's Outpatient Services at 830-2752 or ask your health care provider for a referral or call Lt. Julie Lundstad at 830-2175.

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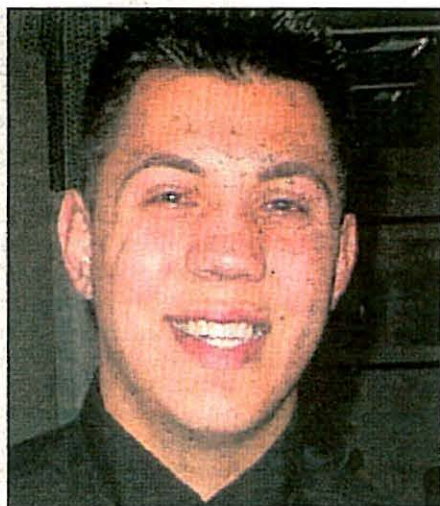
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# Super Stars and Hard Chargers...



*HN Crispen McAllister is made an Honorary Desert Rat upon his departure from the Naval Hospital Twentynine Palms.*



*HM2 Jeremiah Lainer receives his third Good Conduct Medal.*



*HN Norberto Perales-Martinez is made an Honorary Desert Rat upon his departure from Naval Hospital Twentynine Palms.*



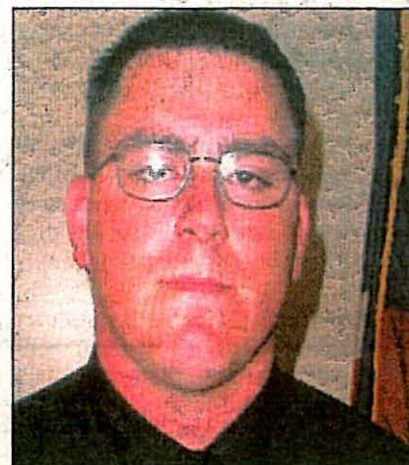
*HM2 Sonya Rainbolt was awarded the Navy and Marine Corps Achievement Medal.*



*HM3 Zachery Boles receives his first Good Conduct Medal.*



*Lt. Sarah Baldwin receives the Navy and Marine Corps Achievement Medal.*



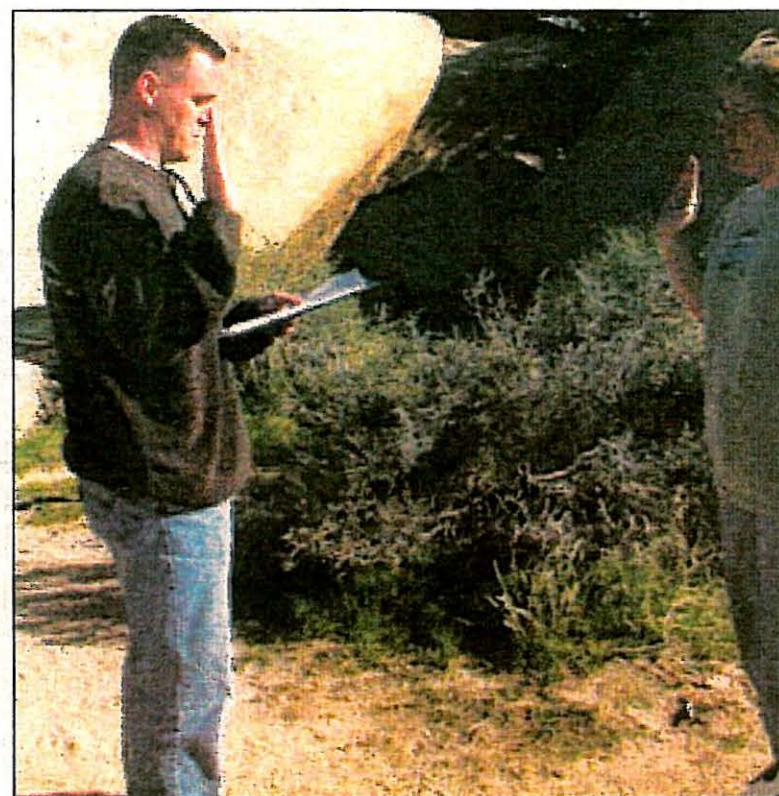
*HM2 Dustin Wagner receives the Navy and Marine Corps Achievement Medal.*



*HM3 Joan Tanner was recently frocked to her current rank.*



*The hospital's Better Business Practices Goal Team recently held an open house to obtain input from all staff members on how to conduct the hospital's business more effectively.*





## Robert E. Bush Naval Hospital



Several staff members of the hospital were honored for their participation in this past year's Toys For Tots program. They are, (in no particular order) HN Christin Word, HN Erick Burgos, HN Tori Cahew, HN Matt Holzemer, HN Mary Hyde, HN Emily Klietz, HN Rhiannon Owens, HN Katrina Thomas, HN Robert Word, HM3 Carmen Key, HM3 Maria Drew, HM3 Oneika Flowers, HM3 Joan Tanner, HM2 Jill Bankus, HM2 Ana Reyes, HM2 Jon Shaw, HM2 Dawn Smith, SK1 Harold Villaluz, Lt.j.g. Joseph Chery, Lt.j.g. Ayessa Fusilero, Lt. Chrisanna Johnson, Lt. Michael Mero, Lt. Suzanne Valdez, Lt. Cmdr. Rebecca Carlin, Lt. Cmdr. Kathleen Hewitt, Lt. Cmdr. Efrem Lawson, Lt. Cmdr. Mary McAllister and Lt. Cmdr. Eileen Sirois. Some members are not in the photo.



Petty Officer Second Class Sonya Rainbolt, the hospital's Health Benefits Advisor, recently took the oath of reenlistment at the Joshua Tree National Park's Hidden Valley. Lt. Brett Hicks, Head of Health Care Operations conducted the oath. Witnessing the event were Rainbolt's two Dalmations.

As part of the hospital's celebration of Women's History Month was a cake cutting ceremony held on the hospital's Quarderdeck. Guarding the cake are left, CSSN Chrisene Altura and CSSA Mary Joy Collier, right.





# What is a Healthy Weight for me?

By Lt. Catherine O. Durham  
Robert E. Bush Naval Hospital

A commonly asked question in Primary Care is "What is a healthy weight for me?"

This is tough to answer and although many people talk about weight, what really matters is how much of your body is fat. Your provider may talk about your Body Mass Index (BMI) which is an approximate measurement of body fat. This number is based on your height and weight. The higher your BMI, the greater your risk for diseases such as diabetes, heart disease, arthritis, and certain cancers.

## So what is a good BMI?

A BMI between 19-25 is considered a normal amount of body fat. If someone's BMI is 25-29.9, that person is said to be overweight. A person is said to be obese if his or her BMI is 30 or higher. Individuals who are weight lifters or others with a high muscle mass content may fall into the higher categories so it is important to remember that these are guidelines and if you have any questions you should

talk to your medical provider.

You can use the table below to check your Body Mass Index.

## How can I lower my BMI?

The Best way to lower your BMI is to reduce to total number of calories you take in, and to be more physically active. Long-term success is about identifying behaviors that contribute to taking in more calories than your body needs. It is also about having a plan to identify triggers to unhealthy eating, and a plan for healthier eating in all situations.

A great way to get started on the path to a healthier lifestyle is to have a goal that includes being more active every day. Be specific about what kind of activity you'll do, for how long, and on which days you will do it. Focusing on losing 40 pounds may be to overwhelming for some, so having a goal as simple as just walking may be an easier place to start.

Here is a great example: "On Monday, Wednesday, Friday, and Saturday I will walk 30 minutes on my lunch break" Once this healthy behavior becomes a habit, you can move on to another goal.

Remember...If you are not

already physically active it is very important to talk to your medical provider to see what physical activity is safe for you!

So the April Challenge is... Get Moving!... and enjoy!

On another note: April 7th is the World Health Organizations, World Health Day. The topic for 2004 is Road Safety.

Road traffic injuries take the lives of 1.2 million men, women, and children around the world each year. Hundreds more become injured or permanently disabled. So remember to wear your seatbelts and have your children in the appropriate infant or child car seat! Be safe.

Coming Next month: More on healthy lifestyles, and skin cancer screening!

BMI	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35
Height (inches)	Body Weight (pounds)																
58	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167
59	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173
60	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179
61	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185
62	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191
63	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	191	197
64	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	204
65	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210
66	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	216
67	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223
68	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	223	230
69	128	135	142	149	155	162	169	176	182	189	196	203	209	216	223	230	236
70	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243
71	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250
72	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	250	258
73	144	151	159	166	174	182	189	197	204	212	219	227	235	242	250	257	265
74	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272
75	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279
76	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287

(Table only goes to BMI of 35 due to space constraints)

## Patient Safety and Communication

By Lt. Richard Salisbury, NC  
Robert E. Bush Naval Hospital

Effective communication in our healthcare setting is both necessary and challenging.

Effective communication is achieved when necessary information is conveyed with clarity and accuracy, such as with a properly functioning stop light. Traffic is able to proceed with ease and safety because the message of "stop" and "go" are clearly communicated. However,

when a power outage occurs, traffic becomes congested and confused as drivers try to decipher the unclear signals from the same stop light.

Similarly, in healthcare where communication must occur at many levels, ranging from you (the patient) upwards through everyone involved in your care, the need for clarity and accuracy is of utmost importance. If at any point along this pathway communication becomes unclear, or "ineffective", the potential for error is drastically elevated. Across the country, hospitals

submit reports of injuries/deaths in their facilities to JCAHO (Joint commission on Accreditation of Health Care Organizations). Of 2,840 reports, JCAHO found the root cause of 65 percent of the incidents was ineffective communication.

At Naval Hospital Twenty Nine Palms, we recognize that patient safety depends strongly on effective communication. Therefore we continually strive to improve each service we provide by examining the quality of communication within. Each service employs patient care representatives that you may contact with any concerns or suggestions regarding the quality and safety of your care. If you are in the hospital after hours, the Quarter Deck watch has patient satisfaction forms that can be filled out and will be sent directly to the service of care you are commenting on. Additionally, if we have a service that works well in communicating with you, we also want to hear about that. While we look inward to improving communication, hearing from patients about our successes and failures helps to keep our healthcare setting in proper functioning order.

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# HEAT CASUALTY...

Continued from page 1

water loss from the body, be sure to weigh yourself regularly during hot weather, especially if you're doing a lot of intense physical activity.

There is no specific temperature beyond which you should not exercise. People have become heat casualties even in subfreezing temperatures because they were overdressed. Any circumstances that cause your body's heat production to exceed its capability to cool off will often result in heat stress. In an effort to prevent serious illness and permanent physical damage most military installations have installed a Wet Bulb Globe Temperature (WBGT) index. The WBGT index consists of a combination of readings from thermometers, providing temperatures for dry, humid and radiant heat.

These three temperatures are combined in a standard formula providing a more accurate reading of heat stress intensity. By calling 830-7831 current information about the current WBGT index reading can be obtained.

To alert Combat Center members of hazardous weather conditions, the following flags are flown to indicate readings and control physical activity:

**Green Flag** -- Unrestricted physical activity may be carried out.

**Yellow Flag** -- Physical activity should be limited to those people who have been exercising in similar heat for a minimum of 10 days or more.

**Red Flag** -- Physical activity is advised only for members who have been working out in similar

heat conditions for a period of 12 weeks for more.

**Black Flag** -- Vigorous outdoor exercise, regardless of conditioning or heat acclimatization, is not advisable.

Combat Center members should be advised to note the flag, which is flown at the headquarters building before beginning outdoor workouts in the summer months. When exercising in the sun, try to wear light (color and weight) clothing. The lighter colors will reflect the sun's rays and the lighter weight will allow for more rapid evaporation. Try to exercise during the coolest parts of the day (early morning or late evening). Also reduce the intensity of your exercise to decrease the heat stress on your body and drink plenty of water.

Although you do not have a choice about the characteristics of work clothing or gear, do not use a vapor barrier (rubber) suit as an aide for weight reduction while exercising. Exercising in a rubberized suit may result in severe dehydration and elevate your core body temperature. Wearing these suits also will not help you with your weight reduction program since the decrease in weight is due to a very temporary loss of fluid, not fat loss.

According to an article written by Captain Michael Anderson a physician at Naval Hospital Cherry Point, N.C. and published in the Navy and Marine Corps Medical News Wire, "Heat exhaustion usually occurs when you sweat a lot and don't drink enough to replace the lost fluids. It generally develops when you

are working or exercising outdoors in hot weather. Symptoms include profuse sweating, fatigue, weakness, headache, dizziness, or nausea. Look for skin that is cool, moist, pale, or flushed. Heat exhaustion can sometimes lead to heat stroke, which requires emergency treatment.

"Heat stroke occurs when your body fails to regulate its own temperature and your body temperature continues to rise, often to 105 degrees or higher. You may stop sweating entirely if you have heat stroke.

"Symptoms of heat stroke include confusion, hallucinations, or unconsciousness. Look for skin that is red, hot and dry. The color of your urine can also tell you your level of dehydration. Generally, the darker your urine, the more water you need to drink in order to replenish lost fluids. When the weather is hot, drink plenty of water and limit your time outdoors. If you notice signs of heat related illness, seek help from a health care provider."

Yet another problem to look at is the consumption of cold medications, diet pills, decongestants, antihistamines or receiving immunizations. These types of medications compromise the body's ability to regulate heat. Members taking any of these types of medications should take extra precautions during the summer heat... Everyone should be aware of their environment... especially the unforgiving environment of the desert.

# SYMBOLS...

Continued from page 1

provides today to the Marine Corps Air Ground Combat Center family is the signal-flags "Charlie Papa."

Without ceremony or fanfare, Naval Medicine shifted its signal flags on Sept. 27, 2001, to "Steaming to assist."

This "Steaming to assist," signal can be found on the flag pole of every Navy Medicine activity worldwide.

According to Captain Robert J. Engelhart, Commanding Officer, Robert E. Bush Naval Hospital, "The Superstars of this command are truly steaming ahead, assisting Marines, Sailors and families of the Marine Corps Air Ground Combat Center, and all those entrusted to our care."

Yet another symbol that is near and dear to all those serving at the Naval Hospital are "Muddy Boots" which represent Naval Medicine's and this Command's goals of...

\* Filling those muddy boots with hyper-fit, hyper-healthy Sailors and Marines.

\* Deploying Naval medical personnel with those muddy boots and treating those who fill them wherever they are.

\* Treating the family members of those who fill those muddy boots ... knowing that no Sailor or Marine can be truly ready if they are concerned about the health of their loved ones.

\* Treating our retirees and their families, those who served this country by filling those muddy boots and the family members who supported them while they did.

Regardless of the symbol, the staff of the Robert E. Bush Naval Hospital will strive to provide the best health care possible and as indicated in yet another symbol... the hospital's Mission and Vision statement... Ensure Force Health Protection... Deliver Quality Care and Service... To be the Hospital of choice for patients and the workplace of choice for staff.



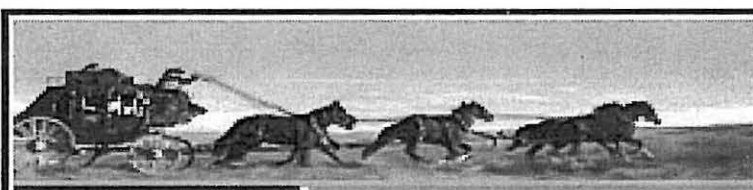
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# Copper Mountain College Students One Step Closer to Careers in Healthcare

## Naval Hospital Provides Clinical Experiences

By Lt. Cmdr. Patrick Ryan, NC,  
Robert E. Bush Naval Hospital

On any given day at Naval Hospital Twentynine Palms (NHTP), you will see staff in a variety of uniforms appropriate for their specific job: coveralls, khakis, winter blues, cammies, civilian attire, and surgical scrubs.

Of recent, you would have seen fifteen individuals wearing white with navy blue vests- these are the Licensed Vocational Nursing (LVN) students of Copper Mountain College (CMC) who were recently on board to satisfy the clinical experience requirement of their program.

According to Ms. Carol Kendall, CMC's Director of Nursing Programs and a Registered Nurse, NHTP and

CMC have partnered for ten years to provide LVN students a meaningful clinical experience.

Students can presently choose to enroll in either a one year, non-degree LVN Certificate Program that meets the requirements set by California for taking the LVN examination and ultimate licensure, or the two year Associate Degree Program.

The flexibility, affordability, and proximity of this program to the residents of the High Desert make the LVN Program a great opportunity to introduce individuals to an entry level healthcare career, especially adults looking for new career challenges.

To prepare for their "clinical" at NHTP, the students are required to attend a one day orientation, coordinated by the Staff Education and Training Departmental staff and similar to

that provided for all hospital staff, covering topics such as infection control, patient safety, pain management, and patient privacy. This orientation satisfies Bureau of Medicine and Joint Commission for Accreditation of Healthcare Organizations (JCAHO) standards.

In addition, nursing leadership representatives of patient care areas students greet the students, providing an overview of the scope of care given to our patients.

During their "clinical", the LVN students are paired up with experienced NHTP providers, nurses, and Corpsmen. Patients give their permission for this team to care for them while in the hospital and are asked to provide feedback to the students. Although a smaller hospital than

most in Navy Medicine, NHTP provides the students a variety of clinical experiences, inpatient and outpatient. Students have positively commented on the approachable nature of the staff, their eagerness to explain in detail rationales for care, and give encouragement to consider higher levels of education in healthcare fields. Unlike their other civilian clinical sites, LVN students at NHTP gain the unique appreciation of the interaction of military life with our patient's healthcare.

To meet the challenges of the current nursing shortage, CMC is in the process of developing an Associate Degree program leading to licensure as an RN. NHTP will also collaborate with CMC

to provide this future program with a quality clinical experience.

The staff of NHTP wishes the following LVN students success on their LVN exams, and in all their healthcare endeavors:

Amanda Buck  
Ashley Calvert  
Shannon Cannon  
Bruce Elder  
Jasalynn George  
Nicole Hamilton  
Sumiko Jackson  
Kimberly Johnson  
Jilliane Mayer  
Kimberly Peters  
Sherrie Sanchez  
Mosses Serrano (not pictured)  
Jennifer Wagner  
Geraldine Willis



## Pharmacy Prescription Policy

The Pharmacy at the Naval Hospital is available from 8 a.m. to 4:30 p.m. for new prescription dispensing, Monday through Friday, excluding base holidays. Refill medications may be picked up until 6 p.m.

To maintain high standards in patient safety and to prevent medication errors, all paper outpatient prescriptions will only be filled at the hos-

pital's pharmacy during the core hours 8 a.m. to 4:30 p.m. Also, only those medications on the hospital's Formulary list can be filled. If you require your medication immediately, and it's after hours for the hospital Pharmacy, or your medication isn't available at the hospital's Pharmacy, you should use the TRICARE retail pharmacy option to obtain your medication at your local drug store.

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